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Date: September 16, 2004	Client & Matter Number: 022176-000300US	No. Pages (including this one): 12
To: Examiner Brian Ensey USPTO	At Fax Number: (703) 872-9306	Confirmation Phone Number: (703) 305-7363
From: Joel M. Harris (5129)		

Message: Attached is an Amendment to the Office Action dated June 22, 2004.

60311070 v1

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60311070 v1

PTO/SB/21 (04-04)

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number 09/181,533
Total Number of Pages in This Submission		Filing Date October 28, 1998
		First Named Inventor SHENNIE, ADNAN
		Art Unit 2643
		Examiner Name BRIAN ENSEY
		Attorney Docket Number 022176-000300US

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
<div style="border: 1px solid black; padding: 2px;"> <input type="checkbox"/> Remarks The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430. </div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	Townsend and Townsend and Crew LLP Joel M. Harris	
Signature		
Date	Reg. No. 44,743 September 16, 2004	

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, Fax No. (703) 872-9306 on September 16, 2004.			
Typed or printed name	Marcia D. Shea		
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60310635 v1

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By: _____
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Attorney Docket No. 022176-000300US
Client Ref. No. ISM/003

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

ADNAN SHENNIB

Application No.: 09/181,533

Filed: October 28, 1998

For: REMOTE MAGNETIC
ACTIVATION OF HEARING
DEVICES

Customer No.: 20350

Confirmation No.

Examiner: BRIAN ENSEY

Technology Center/Art Unit: 2643

AMENDMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action mailed June 22, 2004, please enter the following amendments and remarks:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 8 of this paper.